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# ZILKA-KOTAB

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95 SOUTH MARKET ST., SUITE 420  
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TELEPHONE (408) 971-2573  
FAX (408) 971-4660

## FAX COVER SHEET

Date: September 27, 2004	Phone Number	Fax Number
To: Examiner David L. Ometz, USPTO		(703)872-9306
From: Dominic M. Kotab		

Docket No.: HIT1P019/HSJ920030105US1

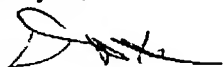
**App. No: 10/614,075**

Total Number of Pages Being Transmitted, Including Cover Sheet: 16

### Message:

Please deliver to Examiner OMETZ.

Thank you,



Dominic M. Kotab

☐ Original to follow Via Regular Mail ☒ Original will Not be Sent ☐ Original will follow Via Overnight Courier

\*\*\*\*\*  
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\*\*\*\*\*

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ANY OTHER DIFFICULTY, PLEASE PHONE Erica  
AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

September 27, 2004

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT

In re application of:

GILL

Application No.: 10/614,075

Filed: 07/02/2003

For: SELF-PINNED IN-STACK BIAS STRUCTURE  
WITH IMPROVED PINNING

Attorney Docket No.:

HIT1P019/HSJ920030105US1

Examiner: OMETZ, David L.

Group Art Unit: 2653

Date: September 27, 2004

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SEP 27 2004

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents via facsimile to fax number (703) 872-9306 on September 27, 2004.

Signed: 

Nancy Rushon

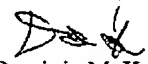
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For	Present Extra	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS	25 -	25	0	X09 = \$	OR	X18 = \$0
INDEP CLAIMS	06 -	03	03	X42 = \$	OR	X86 = \$258
[ ] Multiple Dependent Claim Present and Fee Not Previously Paid				\$130		\$290
TOTAL				\$		\$ 258

☐  
☒Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action. Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-2587.☐  
☒Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees. If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-2587 (Order No. HSJ920030105US1). A copy of this sheet is enclosed for billing purposes.Respectfully submitted,  
Zilka-Kotab, PC  
Dominic M. Kotab  
Registration No. 42,762P.O. Box 721120  
San Jose, CA 95172-1120  
Telephone: (408) 971-2573

(Revised 1/96)

## PATENT

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Signed:

Nancy Rushton

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